

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S) _____

CLAIMS

1	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
2	1					
3	2		✓			
4	2		✓			
5	1					
6	1					
7	X	0				
8	0					
9	1					
10	1					
11	1					
12	3					
13	1					
14	0					
15	0					
16	0					
17	0					
18	0					
19	0					
20	0					
21	0					
22	0					
23	0					
24	1					
25	1					
26	1					
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50						
TOTAL IND.	15		↓		↓	
TOTAL DEP.	955		↔		↔	
TOTAL CLAIMS	30					

51	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						
TOTAL IND.		↓				
TOTAL DEP.		↔		↔		
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS